



Alberta: Health First | Building a better public health system

## Reform highlights

March 2003

alberta  
HEALTH FIRST



## Healthy Alberta

Health care is the number one priority for Albertans.

We are taking steps to create a healthier population and provide high quality health services in the most effective and affordable way. This document highlights key actions the Alberta government has taken over the past year to build a better public health care system.

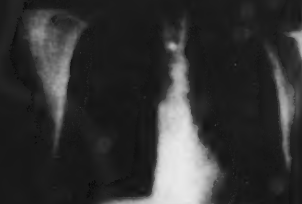
While most of us live healthier and longer lives, rates of obesity, Type 2 diabetes, heart disease and stroke continue to grow.

### Four top killers

Cancer, cardiovascular disease, chronic lung disease and diabetes are the top four causes of chronic illness and death in Alberta. These diseases are linked by preventable risk factors such as tobacco use, unhealthy diet and physical inactivity.

The most recent statistics show:

- 110,000 Albertans have been diagnosed with diabetes.
- More than 300,000 Albertans have been diagnosed with heart disease.
- 729,500 have been diagnosed with chronic respiratory disease.
- Between 300 and 400 of every 100,000 Albertans suffer from cancer.
- 43 per cent of Albertans are not active enough to maintain health.
- 49 per cent consider themselves to be overweight.





## Path to a healthier population

*The key to a healthier population is helping Albertans to take responsibility for their personal health.*

**Here are some of the steps we are taking:**

### Strategies for better health

A new plan to cut the rates of chronic disease, promote healthy behaviour and prevent injuries over the next 10 years will be finalized in April 2003. A strategy to reduce the rising rate of diabetes will be a key part of this plan.

**Ninety per cent of diabetics, or 99,000 Albertans, have been diagnosed with Type 2 diabetes, which is largely preventable.**

### Healthy "U" public information campaign

Research shows that most people believe they could do more to be healthy. This province-wide TV, radio and newspaper campaign encourages Albertans to take simple, everyday steps to eat healthy and be more physically active. A Web site provides tips and links to reliable information on how to stay healthy.



**[www.healthyalberta.com](http://www.healthyalberta.com)**

## Tobacco reduction strategy

Alberta continues to have one of the highest rates of smoking in Canada. This strategy includes the highest tobacco sales taxes in the country, a toll-free Smoker's Help Line to counsel people who want to quit and a full range of programs to educate kids about the dangers of tobacco. New legislation that prohibits minors from possessing and using tobacco was recently introduced.

**Tobacco sales have dropped by 13.7 per cent in Alberta between January and July 2002.**

**Alberta is spending close to \$4 per capita on the tobacco reduction strategy, more than any other province or territory.**

## Healthier children

In 2002, new curriculum was developed to help children in kindergarten to Grade 12 learn more about how to be healthy. Schools will also be encouraged to join Ever Active Schools, a program that encourages regular physical activity for all students.

**In Alberta, about 57 per cent of youth are not active enough to lay a solid foundation for their future health, according to the Canadian Fitness and Lifestyle Research Institute.**



## Efficient, high quality care

*A public health care system must provide essential health services to all Albertans, where and when they need them. Our aim is to develop a health care system that delivers high quality health services in the most efficient way.*

### Here are some of the steps we are taking:

#### Health Link – essential health information a phone call away

Health Link, a toll-free health advice and information service provided by the Capital and Calgary Health Regions, has provided dependable advice to thousands of people and saved hundreds of unnecessary trips to emergency rooms. This health information service will be available to all Albertans this summer.

**In its first two years of operation, Health Link registered nurses handled more than 560,000 calls. The Capital Health Region estimates the telephone service will prevent 14,000 unnecessary emergency visits in the region this year.**

#### Managing access to services

Reducing waiting lists for surgeries and procedures continues to be a challenge. This summer, an Internet wait list registry will show the wait times for surgeries and diagnostic tests performed by specific surgeons and health professionals in certain Alberta hospitals. The registry will help Albertans and their physicians plan where they can go for surgical and diagnostic procedures. Alberta Health and Wellness will also use the registry to monitor wait times for a wide variety of surgeries and diagnostic tests at Alberta hospitals.

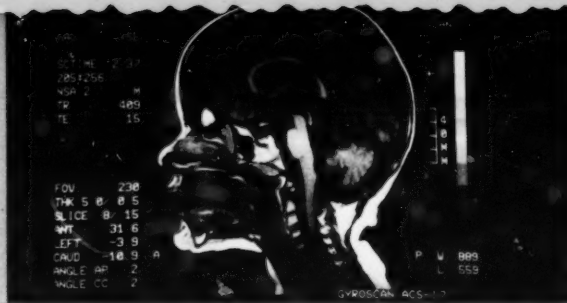
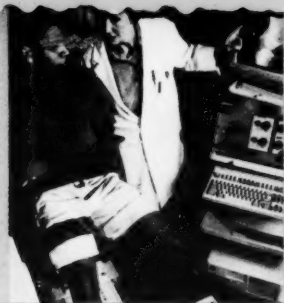
**Every year, more than 250,000 surgeries and diagnostic tests are performed in Alberta's rural and urban hospitals.**

#### Electronic health records

Technology is our ally in providing the fast and secure exchange of health information.

Recent pilot tests of electronic medication information used by 13 pharmacists and 34 physicians in Westlock and Leduc resulted in more effective decisions about drug prescriptions for 2,800 patients. More than 20,000 prescriptions have been entered to date.





Electronic health records are now being expanded to provide access for radiology and laboratory tests. By viewing complete and accurate electronic health information about their patients, health care providers will be able to make more effective decisions about the care they provide.

**By March 2004, all nine health regions, one-third of the 1,200 physicians' offices and half of the 400 pharmacies in the province will use electronic health records for access to laboratory test results and drug profiles.**

### Telehealth services

Alberta is an international leader in delivering health and educational services using telecommunications technology.

Telehealth allows a doctor in Grande Prairie to consult with both an oncologist and thoracic surgeon in Edmonton by sending a lung cancer X-ray. Patients can receive mental health consultations with psychiatrists through videoconference sites throughout the province, including Drumheller, Edson and Drayton Valley. Doctors and nurses working in rural communities can discuss best practices by sending images and conversing by videoconference.

**More than 20 different clinical services are delivered by telehealth in Alberta.**

**Telehealth technology allows clients to receive services without having to leave their community.**

### Regional control over health services

Regional health authorities are required to decide how best to provide health services to their residents. In many cases, meeting the needs of communities has meant converting acute care hospitals to long-term centres. Mental health services are a new responsibility for the province's health regions, while the Alberta Mental Health Board will continue to manage province-wide services and programs such as forensic psychiatry, suicide prevention, Aboriginal mental health, and telemental health.

### Making the best use of health professionals

This spring a comprehensive strategy will be completed to help plan for the necessary supply of health care workers and address other health workforce issues. New agreements with physicians and registered nurses will be established to ensure Alberta can attract and retain the number of health professionals it needs.



# An affordable system

## Costs of paying for public health care

*Since 1995, health spending in Alberta has risen by almost 85 per cent, four times faster than all other government spending. Today, about 35 per cent of provincial program spending is spent on health. The cost of new drugs, technologies and treatments contribute in large part to the growing expense of our public health care system.*

*New efficiencies must be found to achieve a system that is affordable and effective.*

## Federal money

In February 2003, federal, provincial and territorial governments discussed future health care priorities. Action on primary health care, home care, catastrophic drug coverage and purchasing new medical equipment was discussed and some new federal funding was agreed to.

Alberta will receive \$250 million in the first year of a three-year commitment announced in the 2003 federal budget. While the federal financial commitment has increased, Alberta, like other provinces, must still bear the majority of costs to provide essential health services. The \$250 million for the next fiscal year only pays to operate Alberta's health system for 13 days.

**It costs almost \$7 billion per year, or \$19 million each day, to operate Alberta's public health care system.**

**The federal government pays only about 16 per cent of Alberta's health care costs.**

## Reduced regions to increase efficiency

By April 1, 2003, nine new health regions will be created to provide a more efficient way to provide health care services.

Converting 17 regions to nine will reduce the flow of patients and money out of the smaller regions and give them the resources to better meet patient needs. Larger regions will have the population size, facilities and resources to meet a wider range of health care needs and help to attract and retain health professionals.

## Innovation and collaboration in health services

Regional health authorities (RHAs) are being asked to take advantage of more opportunities to collaborate, innovate and achieve cost efficiencies.

RHAs are being asked to:

- Improve collaboration among regions and develop new models of care.
- Establish centres of specialization.
- Contract with a blend of providers to offer a range of services and encourage innovation.





## Accountability

### Public, private and non-profit providers

The Alberta government supports the Premier's Advisory Council on Health recommendation to use an innovative blend of public, private and not-for-profit organizations and facilities to deliver public health care services.

Regional health authorities are participating in public-private partnership projects with long-term care facilities to allow them to share building costs with private or not-for-profit providers.

### Rural health care needs

Albertans can be assured of access to high quality, essential health services no matter where they live. How to address the unique challenges of providing access to health care services to rural communities is the focus of a recently appointed MLA committee.

The committee will review previous studies and seek the input of stakeholders on areas that touch rural health needs, such as consistent standards for accessing emergency and acute care, primary health care and health workforce initiatives, and the use of technology to improve the delivery of health care to rural Albertans.

Making the right decisions about health care is a shared responsibility between Albertans, government and health care providers.

Each year, government conducts a public survey to plan, monitor and report on the health of Albertans and measure the performance of the health system.

This April, the Alberta government will enter into three-year performance agreements with all regional health authorities. These agreements will establish clear performance expectations to improve accountability and deliver a high standard of health care services.

### Reporting our progress on health reform

The government action plan on health has provided us with a course of action and a timeframe to deliver positive new changes.

Since the announcement of the government's action plan on health, the Health Reform Implementation Team has monitored progress on health reform. Appointed by the Minister of Health and Wellness, this independent team has overseen work on the action plan and has provided two progress reports to Albertans.

We will continue to announce new developments and provide regular progress reports to Albertans.



## Continual improvement

Health reform is moving ahead, but will take time. Reform is necessary to build a better public health care system. Changes we make today will ensure an affordable, high quality system for tomorrow.



For more information, contact:

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